

OCT. 14. 2003 9:07AM

858 792-6773 FOLEY AND LARDNER

NO. 4798 P. 1

FOLEY & LARDNER

ATTORNEYS AT LAW

11250 EL CAMINO REAL, SUITE 200

SAN DIEGO, CA 92130

P.O. BOX 80278

SAN DIEGO, CALIFORNIA 92138-0278

TELEPHONE: 858.847.6700

FACSIMILE: 858.792.6773

WWW.FOLEYLARDNER.COM

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From : Richard San Pietro
Email Address : rsanpietro@foleylaw.com
Sender's Direct Dial : 858.847.6717
Date : 10/14/2003
App. Serial Number : 09/675,518
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Transmitted herewith for filing is a Request for Continued Examination. Thank you.

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Atty. Dkt. No. 074022-3303

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: DREWES et al.

Title: METHODS AND DEVICES FOR
MASS TRANSPORT ASSISTED
OPTICAL ASSAYS

Appl. No.: 09/675,518

Appl. Filing Date: 09/29/2000

Examiner: B. Foreman

Art Unit: 1634

CERTIFICATE OF FACSIMILE TRANSMISSION	
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October 14 2003 (Date of Deposit)	

**REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL**Mail Stop RCE
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450**OFFICIAL**

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Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

- Please enter and consider the amendment/reply previously filed on September 10, 2003.

-1-

Atty. Dkt. No. 074022-3303

The filing fee is calculated below:

Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
			\$770.00	\$770.00
RCE Fee 1.17(e)				
Total Claims: 28	□ 41	= 0	x \$18.00 =	\$0.00
Independents: 2	□ 3	= 0	x \$86.00 =	\$0.00
First presentation of any Multiple Dependent Claims:		+ \$290.00	=	\$0.00
			CLAIMS FEE TOTAL:	\$770.00

[X] Please charge Deposit Account No. 50-0872 in the amount of \$770.00. A duplicate copy of this transmittal is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date: Oct. 13, 2003

Respectfully submitted,

FOLEY & LARDNER
Customer Number: 30542

30542
PATENT TRADEMARK OFFICE
 Telephone: (858) 847-6700
 Facsimile: (858) 792-6773

By: Richard San Pietro

Richard San Pietro
 Attorney for Applicant
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